Owosso Bark Park

Wag N’ Walk Registration Form-$25

June 6th, 2010-Chemical Bank/River Loop

Registration starts at 10:00AM Walk starts at 11:00AM \*Rain or Shine\*

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_ St: \_\_\_\_\_Zip:\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-shirt size: 🞏S 🞏M 🞏L 🞏XL🞏2XL 🞏3XL

Please return registration to:

Owosso Bark Park

ATTN: Wag N’ Walk

P.O. Box 1001

Owosso, MI 48867

Please make checks payable to “Owosso Bark Park”

Dogs Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Limit 1 Dog per Registration\*

Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Weight:\_\_\_\_\_\_\_\_\_

\*Dogs must be up-to-date with all routine vaccinations\*

Each registered walker/dog pair will receive a t-shirt, bandana and doggie bag. If you have children or additional adults that will walk with your group the cost is $10 per person and they will receive a t-shirt for walking.

Additional Walkers-$10 each (includes t-shirt)

Child: 🞏S 🞏M 🞏L 🞏XL

Child: 🞏S 🞏M 🞏L 🞏XL

Adult: 🞏S 🞏M 🞏L 🞏XL🞏2XL 🞏3XL

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Waiver: In consideration of being permitted to participate in the “Owosso Bark Park” event, I hereby for myself (and my children), my heirs, and my personal representatives assume any and all risks that might be associated with the event. I further waive, release, discharge, and convenant not to sue “Owosso Bark Park”, its officers, sponsors, volunteers, legal representatives, successor or the owner of the site for the event and all injuries or damages of any kind whatsoever suffered as a result of me and/or my child/animal taking part in the event and any related activities. I also agree to the use of any photo, film, or videotape of the event for any purpose. I also give my full permission for such first aid as deemed necessary to be provided to me and or my child/animal on the premises or prior to transport to a hospital for further treatment.

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



Questions?: Contact [owossobarkpark@gmail.com](mailto:owossobarkpark@gmail.com) or

our facebook fan page “Owosso Bark Park”